

"FEE ADDRESS" INDICATION FORM

Address to:
Commissioner for Patents
Box M Correspondence
Washington, DC 20231

INSTRUCTIONS: Only an address associated with a Customer Number can be established as the fee address for maintenance fee purposes (hereafter, fee address). A fee address should be specified when the patentee would like correspondence related to maintenance fees to be mailed to a different address than the correspondence address for the application. If there is a Customer Number already associated with the fee address for the patent or allowed application, check the first box below and provide the Customer Number in the space provided. If there is no Customer Number associated with the fee address for the patent or allowed application, you must check the second box below and attach a Request for Customer Number form (PTO/SB/125). For more information on Customer Numbers, see the Manual of Patent Examining Procedure (MPEP) § 403.

Please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with:

☒ Customer Number 05318

Type Customer Number here

OR

☐ Request for Customer Number (PTO/SB/125) attached hereto

in the following listed application(s) for which the Issue Fee has been paid or patent(s).

PATENT NUMBER (if known)	APPLICATION NUMBER
	10/623,272

Completed by (check one):

☐ Applicant/Inventor

☒ Attorney or Agent of record 51,868
(Reg. No.)

☐ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

Assignee recorded at Reel _____ Frame _____


Signature

Beth L. Kelly

Typed or printed name

(415) 576-0200

Requester's telephone number

July 30, 2007

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.363. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 5 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Box M Correspondence, Washington, DC 20231.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

Approved for use through circulation and sale by
U.S. Postal and Transport Service U.S. Department of Commerce
Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

INSTRUCTIONS: Only an address associated with a Customer Number can be established as the address for correspondence for purposes of (Particular, the address). A fee address should be specified when the address would be correspondence related to maintenance fees to be paid to a different address than the correspondence address for the application. If there is a Customer Number already associated with the fee address for the patent or allowed application, check the first box below and provide the Customer Number in the space provided. If there is no Customer Number associated with the fee address for the patent or allowed application, you must check the second box below and attach a Request for Customer Number form (PTO/SB-212). For more information on Customer Numbers, see the Manual of Patent Examining Procedure (MPEP) § 401.

Customer Number: 33123

☐ Request for Quotation Number (PTQ/BA/123) Attached hereto
in the following listed supplement(s) for which the issue Fee has been paid by customer(s).

Completed by (check one)

David W. Jones

~~World R. Cruise~~
~~Typed or printed name~~

117-248-2000
Requester's telephone number

MAY 3, 1987

Centre

NOTES: Operations of all the branches or subgroups of except of the entire (parent or child representative) are completed (subject) and the name of them that
 respective is completed and listed.

[illegible]